1.	Agency Name				Date Stamp	California 802
	City of Glendale, California					Form OUZ
	Division, Department, or Regi	ion (If Applicabl	e)			For Official Use Only
	Management Services					
	Designated Agency Contact (Name, Title)				
	Scott Ochoa, City Manager				Amendment (Must pn	puide evolunation in Part 3)
	Area Code/Phone Number	E-mail				
	818-548-4844	sochoa@gle	endaleca.gov	<i>'</i>	Date of Original Filing: _	(Month, Day, Year)
2.	Function or Event Infor	mation				25.00
	Does the agency have a ticke	•	Yes 🛛 No	Face Value o	f Each Ticket/Pass \$	35.00
	Event Description Glendale I	Oodger Night		Date(s)	, 12 , 16	
		·	vanadon			
	Ticket(s)/Pass(es) provided by	y agency?	Yes 🛛 No	☐ If no:	Name of Sou	rce
	Was ticket distribution made a	t the behest	No 🖾 Yes	No 🛛 Yes 🗖 If yes:Official's Name (Last, First)		
of agency official?				Official's Name (L	ast, First)	
3.	Recipients					
	Use Section A to identify the agency	y's department or		ction B to identify an individu	al. • Use Section C to identi	fy an outside organization.
	A. Name of Agency, Departme	nt or Unit	Number of Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant (to the agency's policy
	<u> </u>	1				
			!			
	B. Name of Individua	il	Number of Ticket(s)/ Pass(es)		identify one of the following	ng:
	Sinanyan, Zareh		-	Ceremonial Role		Income 🔲
	Omanyan, Zaren		1 1	-	ial Role" or "Other" describe below: Public Purpose. Promo	otion of City recognition,
				visibility and/or prof		and the state of t
	Gharpetian, Vartan			Ceremonial Role		Income 🔲
	Gliaipetiali, valtali		1 1		iel Rale" or "Other" describe below: Public Purnose. Promo	otion of City recognition,
				visibility and/or profi		active on only recognition,
	C. Name of Outside Organ	ization	Number of	5	a sector in a con-	415
	(include address and des		Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant t	to the agency's policy
		·				
			i			
4.	Verification //		_			
	I have read and understand PPPC Regul	lations 18944.1 an	d 18942. I have ve	erified that the distribution set fo	orth above, is in accordance with	the requirements.
	XXII //		Scott Oc	hoa	City Manager	May, 12, 2016
	ignaturo obligancy Head or Designee		Print Nam		Title	(Month, Day, Year)
	Comment:					
	OUTHINGHL					

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1.	Agency Name		Date Stamp	California 802			
	City of Glendale, California					Form OUZ	
	Division, Department, or Reg	ion (If Applicabl	le)		1	For Official Use Only	
	Management Services						
	Designated Agency Contact (Name, Title)			1		
	Scott Ochoa, City Manager				Amondment /third o	muido evalencias in Red 2)	
	Area Code/Phone Number	E-mail			Amendment (Must provide explanation in Part 3.)		
	818-548-4844	sochoa@gle	endaleca.gov	•	Date of Original Filing: .	(Month, Day, Year)	
2.	Function or Event Infor	mation				05.00	
				Face Value o	f Each Ticket/Pass \$ _	35.00	
	Event Description Glendale [Date(s)05	12 , 16			
	•	Provide Title/Exp	planation	. ,			
	Ticket(s)/Pass(es) provided by	y agency?	Yes 🗵 No	s 🗵 No 🗌 If no:			
	Was ticket distribution made a	No 🕅 Vos	No 🛮 Yes 🗌 If yes:Official's Name (Last, First)				
	of agency official?	140 🖾 162					
3. Recipients							
	Use Section A to identify the agency	y's department or	runkt. • Use Sec	ction B to identify an individu	ıal. • Use Section C to ident	tify an outside organization.	
	A. Name of Agency, Departme	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy				
	Management Services	4	FPPC 18944.1(C)-Public Purpose. Promotion of City recognition, visibility and/or profile on a local scale				
	B. Name of Individual		Number of Ticket(s)/ Pass(es)				
				Ceremonial Role If checking *Ceremoni	Other Interest of the control of the	Income	
				Ceremonial Role	Other C	Income	
	C. Name of Outside Organ (Include address and des		Number of Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant	to the agency's policy	
	Verification	ialions 18944 1 an	d 18942. I have ve	erified that the distribution set fr	orth above, is in accordance wit	h the requirements.	
	\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		Scott Ocl		City Manager	May, 12, 2016	
	esinature of Agency Head or Designee		Print Nem		Title	(Month, Day, Year)	
Comment:							

1.	. Agency Name				Date Stamp	California On 2	
- •	City of Glendale, California					Form 8UZ	
	Division, Department, or Regi	ion (If Applicable	9)			For Official Use Only	
	Management Services						
	Designated Agency Contact (Name, Title)					
	Scott Ochoa, City Manager	•					
	Area Code/Phone Number	E-mail			Amendment (Must pro	vide explanation in Part 3.)	
	818-548-4844	sochoa@gle	endaleca.gov	,	Date of Original Filing: (Month, Day, Year)		
2.	Function or Event infor	mation				· · · · · · · · · · · · · · · · · · ·	
	Does the agency have a ticke	t policy?	Yes 🛛 No	☐ Face Value o	f Each Ticket/Pass \$	35.00	
	Event Description Glendale [Oodger Night		Date(s)	12 , 16		
		Provide Title/Exp	lanation				
	Ticket(s)/Pass(es) provided by agency? Yes			s ☑ No ☐ If no:			
	Was ticket distribution made a	No ⊠ Yes	No ☑ Yes ☐ If ves:				
	of agency official?			,	f yes:Official's Name (Lest, First)		
3. Recipients							
	Use Section A to Identify the agency	y's department or	unit. • Use Sec	ction B to Identify an Individu	al. • Use Section C to Identif	y an outside organization.	
	A. Name of Agency, Departme	Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy				
	City Attorney/Legal	1		Public Purpose, Promot	ion of City recognition,		
			2	visibility and/or profi	ile on a local scale		
	B. Name of Individua	<u> </u>	Number of		Identify one of the following	-	
	(Lux, First)	••	Ticket(s)/ Pass(es)		g: 		
				Ceremonial Role		Income 🔲	
				ir checking Ceremoni	al Role" or "Other" describe below:		
				Ceremonial Role	Other D	Income	
				Ť			
			No. 1				
	C. Name of Outside Organ (include address and des		Number of Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant to	the agency's policy	
			1 2 3 4 5				
	Verification						
I have read and understand FRHC Regulations 18944.1 and 18942. I have verified					·		
	Signature of Agency Head or Designee		Scott Oci		City Manager	May, 12, 2016 (Month, Day, Year)	
	argyatura or Agency Freed or Designee		rant warn		1 ing	(Munici, D ey , 1981)	
	Comment:						

1	Agency Name				Baia Siama	California Ong	
١.	-		Date Stamp	Form 802			
	City of Glendale, California	AP 4				For Official Use Only	
	Division, Department, or Regi	on (If Applicable	e)			,	
	Management Services						
	Designated Agency Contact (Name, Title)					
	Scott Ochoa, City Manager				<u> </u>		
	Area Code/Phone Number	E-mail			Amendment (Must pro	ovide explanation in Part 3.)	
	818-548-4844		endaleca.gov	,	Date of Original Filing:		
2.	Function or Event Inform					(Morius, Day, 1901)	
	Does the agency have a ticket		Yes 🛛 No	☐ Face Value o	f Each Ticket/Pass \$	35.00	
	• •		_				
	Event Description Glendale D	lanation	Date(s)	, 12 , 16			
	Tieket/a\/Dece/as\ assuided by	_ •		□ If so:			
	Ticket(s)/Pass(es) provided by	Yes 🗵 No	⊔ " "" <u></u>	Name of Source			
	Was ticket distribution made a	t the behest	No 🛛 Yes	lf ves:			
	of agency official?				Official's Name (La	ast, First)	
3.	Recipients			 .	··· · · · · · · · · · · · · · · · · ·		
	Use Section A to identify the agency	's department or	_	tion B to identify an Individu	al. • Use Section C to Identif	fy an outside organization.	
	A. Name of Agency, Departme	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy				
	City Clerk's Office		1	FPPC 18944.1(C)-Public Purpose. Promotion of City recognition, visibility and/or profile on a local scale			
			N				
	B. Name of Individua	I	Number of Ticket(s)/ Pass(es)				
				Ceremonial Role	Other Interior of the control of the	Income 🗔	
				Ceremonial Role If checking *Ceremoni	Other Call Color of C	Income 🔲	
	C. Name of Outside Organ (include address and des		Number of Ticket(s)/ Pass(es)	Describe the pub	ilc purpose made pursuant t	o the agency's policy	
)					
	Verification I have read and understand FPPC Regul	ations 18944.1 an	d 18942. I have ve	rified that the distribution set fo	orth above, is in accordance with	the requirements.	
	SHA'V		Scott Ocl		City Manager	May, 12, 2016	
	Signature of Agency Head or Designee		Print Name		Title	(Month, Day, Year)	
	Comment						

_						Ter abile becamen	
1.	Agency Name		Date Stamp	California 802			
	City of Glendale, California					FOIIII	
	Division, Department, or Reg	ion (if Applicable	e)			For Official Use Only	
	Management Services						
	Designated Agency Contact ((Name, Title)					
	Soott Ookoo City Managar						
	Scott Ochoa, City Manager Area Code/Phone Number	E-mail			Amendment (Must pro	ovide explanation in Part 3.)	
	818-548-4844	sochoa@gle	andaleca dov	,	Date of Original Filing:		
_	Function or Event Infor		madicoa.gov			(Month, Day, Year)	
۷.	Does the agency have a ticke		V 🖾 N-	□ Face Value o	f Each Ticket/Pass \$	35.00	
			Yes 🛛 No	_			
	Event Description Glendale [Provide Title/Exp.	longtion	Date(s)	12 , 16		
	Ticket(s)/Pass(es) provided by	y agency?	Yes 🛛 No	☐ If no:	Name of Sou	rce	
	Was ticket distribution made a	at the behest	No ☑ Yes				
of agency official?			If yes:Official's Name (Lest, First)				
3. Recipients							
	Use Section A to identify the agency	al. • Use Section C to identif	ly an outside organization.				
	A. Name of Agency, Department or Unit Number of Ticket(s)/ Pass(es)			Describe the public purpose made pursuant to the agency's policy			
	Human Resources					tion of City recognition,	
0			"	visibility and/or profi	lie on a local scale		
	B. Name of Individue		Number of Ticket(s)/ Pass(es)		Identify one of the following:		
				Ceremonial Role Other I Income			
				If checking *Ceremoni	al Role" or "Other" describe below:		
			+	Ceremonial Role		Income 🔲	
				l .	Other al Role* or "Other" describe below:	income 🗀	
	C. Name of Outside Organ		Number of Ticket(s)/	Describe the publ	lic purpose made pursuant t	n the agency's policy	
	(include address and des	scription)	Pass(es)	= 3.0			
			•				
							
4.	Verification //						
-	I have read and understand FPPC Regu	lations 18944.1 and	d 18942. I have ve	erified that the distribution set fo	orth above, is in accordance with	the requirements.	
	Oth de		Scott Oc	hoa	City Manager	May, 12, 2016	
	Signature of Agency Head or Designee		Print Nam	10	Title	(Month, Day, Year)	
Comment:							

1. Agency Name			Date Stamp	California 802		
	City of Glendale, California					Form OUZ
	Division, Department, or Regi	on (if Applicable	(e)		1	For Official Use Only
	Management Services					
	Designated Agency Contact (Name, Title)			i	
	Scott Ochoa, City Manager					
	Area Code/Phone Number	E-mail			Amendment (Must pro	
	818-548-4844	sochoa@gle	endaleca.gov	•	Date of Original Filing:	(Month, Day, Year)
2.	Function or Event Inform	nation				
				f Each Ticket/Pass \$	35.00	
	Event Description Glendale D	odger Night		Date(e) 05	, 12 , 16	1
	boodilpateti	Provide Title/Exp	lanation			
	Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no:			☐ If no:	Name of Sour	
	Mon tinted distallant	4 4 ha - L - L -		_		
	Was ticket distribution made a of agency official?	ıı ırıe Denest	No 🔀 Yes	☐ If yes:	Official's Name (La	nst, First)
J.	Recipients • Use Section A to Identify the agency	r's department or	unit. • Use Sec	tion B to identify an Individu	ai. • Use Section C to identif	y an outside organization.
A Number			Number of Ticket(s)/	ı	lic purpose made pursuant to	
			Pass(es)	FPPC 18944.1(C)-Public Purpose. Promotion of City recognition,		
	Community Services and Pa	arks	5	FPPC 18944.1(C)-P visibility and/or profi		ion of City recognition,
		The state of profit				
						32
	R Name of Individua	1	Number of			
	B. Name of Individua		Ticket(s)/ Pass(es)	Identify one of the following:		
				Ceremonial Role	_	Income
				If checking *Ceremonia	al Role" or "Other" describe below:	
				Ceremonial Role	Other	Income
					al Role" or "Other" describe below:	
			Number of			
	Name of Outside Organi (include address and desc		Ticket(s)/ Pass(es)	Describe the publ	lic purpose made pursuant to	the agency's policy
			. =34(84)			
			+			
_	Verification (L		
	I have read and understand FPPC Regula	ations 18944.1 and	d 18942. I have ve	rified that the distribution set fo	rth above, is in accordance with (the requirements.
Scott Och			City Manager	May, 12, 2016		
	Signature of Agency Head or Designee		Print Name		Title	(Month, Day, Year)
	Comment:					

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1.	Agency Name				Date Stamp	California 802
	City of Glendale, California					Form OUZ
	Division, Department, or Reg	ion (If Applicabl	le)		1	For Official Use Only
	Management Services					
	Designated Agency Contact ((Name, Title)				
	Scott Ochoa, City Manager					<u> </u>
	Area Code/Phone Number	lE-mail			Amendment (Must pro	vide explanation in Part 3.)
	818-548-4844		endaleca.gov	,	Date of Original Filing:	(Month, Day, Year)
_	Function or Event Infor					(Monin, Day, Year)
	Does the agency have a ticke		Yes 🛛 No	☐ Face Value o	f Each Ticket/Pass \$	35.00
	Event Description Geridale L	Provide Title/Exp	ianation	Date(s)	12 , 16	
	Tille Manager Considered by			— 15 max		
	Ticket(s)/Pass(es) provided by	y agency?	Yes 🗵 No	☐ II IIO:	Name of Sour	ce
	Was ticket distribution made a	at the behest	No 🛛 Yes	No ☑ Yes ☐ If yes:Official's Name (Lest, F		
	of agency official?			Official's Name (La	st, First)	
3. Recipients						
	Use Section A to identify the agency	y's department or	runit. • Use Sec	tion B to identify an individu	ial. • Use Section C to identif	y an outside organization.
	A. Name of Agency, Departme	Number of Ticket(s)/ Pass(es)	Ticket(s)/ Describe the public purpose made pursuant to the agency's			
	Community Development		9	FPPC 18944.1(C)-Public Purpose. Promotion of City recognit visibility and/or profile on a local scale		
		Number of Ticket(s)/		Identify one of the followin	g:	
	(Lest, First)		Pass(es)			
				Ceremonial Role If checking *Ceremoni	Other Dieler Role or "Other" describe below:	Income 🔲
				Ceremonial Role	Other I	tncome 🔲
	C. Name of Outside Organ (include address and des		Number of Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant to	o the agency's policy
	Verification 5000 8000	intions 40024.4		alliand shows show allocate at a const	adh abana ta ta ann a	
	I have read and understand FPPC Regul	iations 18944,1 an				·
	DIVI	<u> </u>	Scott Ocl		City Manager	May, 12, 2016
	Signature of Agency Head or Designee		Print Nem	o	Title	(Month, Day, Year)
Comment:						

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1. Agency Name				Date Stamp	California 802	
	City of Glendale, California					Form 002
	Division, Department, or Reg	ion (If Applicable	e)			For Official Use Only
	Management Services					
	Designated Agency Contact ((Name, Title)		<u> </u>	1	
	Scott Ochoa, City Manager	•				
	Area Code/Phone Number	E-mail			Amendment (Must pro	ovide explanation in Part 3.)
	818-548-4844		endaleca.gov	,	Date of Original Filing: _	
2	Function or Event Infor		Jildaloca.gov			(Month, Day, Year)
۷.	Does the agency have a ticke		Van 🔽 Na	☐ Face Value o	of Each Ticket/Pass \$	35.00
			Yes 🛛 No	_		
	Event Description Glendale [Provide Title/Exp	lenstion	Date(s)	12 , 16	
		•				
	Ticket(s)/Pass(es) provided by	y agency?	Yes 🛛 No	☐ If no:	Name of Soul	rce
	Was ticket distribution made a	at the behest	No 🖾 Yes	☐ If yes:		
	of agency official?		110 21 100		Official's Name (Le	est, First)
3. Recipients						
	• Use Section A to identify the agency	y's department or	unit. • Use Sec	ction B to identify an individu	ial. • Use Section C to Identif	y an outside organization.
A. Name of Agency, Department or Unit			Number of Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant t	o the agency's policy
	Glendale Water & Power				tion of City recognition,	
6		٥	visibility and/or profi	ile on a local scale		
	B. Name of Individua	al .	Number of Ticket(s)/	identify one of the following:		
	(Last, First)		Pass(es)			
				Ceremonial Role	Other other	Income
					arrian ar adjor doomles south.	
			Ì	Ceremonial Role	Other	Income
				If checking *Ceremoni	ial Role" or "Other" describe below:	
			Number of			
	C. Name of Outside Organ (include address and des		Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant to	o the agency's policy
			rasa(us)			
					<u>_</u> .	
4	, , , ,					
	Verification I have read any purposity of FPPC Regulation	lations 180// 1 c-	d 18042 bases	rified that the dictribution act G	orth phove in in accordance with	the manimuments
	Thave read allegar personal Free Regul	iauona 10344,1 a R				
	Signature of Agency Head or Designee		Scott Ocl		City Manager	May, 12, 2016
	Signature of Agency Head or Designae		сти нат		100	(Month, Day, Year)
Comment:						

1. Agency Name				Date Stamp	California 802		
	City of Glendale, California					Form OUZ	
	Division, Department, or Regi	ion (If Applicable)			For Official Use Only	
	Management Services						
	Designated Agency Contact (Name,Title)					
	Scott Ochoa, City Manager						
	Area Code/Phone Number	E-mail			Amendment (Must pro	vide explanation in Part 3.)	
	818-548-4844	sochoa@gle	ndaleca.gov	,	Date of Original Filing:	(Month, Day, Year)	
2.	Function or Event Inform	mation				(1101101, 20), 1001)	
	Does the agency have a ticke	t policy?	Yes 🛛 No	☐ Face Value o	f Each Ticket/Pass \$	35.00	
	— — —			, 12 , 16	, ,		
	Event Description Date(s) Date(s)						
	Ticket(s)/Pass(es) provided by	y agency?	Yes 🗵 No	☐ If no:	Name of Sour		
Was ticket distribution made at the behest No ☑ Yes ☐ If yes: of agency official?			Official's Name (La	est First)			
			Cambia a rechta (La				
3.	Recipients • Use Section A to identify the agency	r's department or	unit. e Use Sec	tion B to identify an Individu	ial. • Use Section C to Identif	v an outside organization	
Use Section A to identify the agency's department or unit. Number of Number of Ticket(s) Name of Agency, Department or Unit Number of Ticket(s) Describe the partment or Unit							
The state of the s			Ticket(s)/ Pass(es)	VV 18 - U. SOIT - INDEST			
Public Works		FPPC 18944.1(C)-F	Public Purpose. Promot	ion of City recognition,			
	2		2	visibility and/or profi	ile on a local scale		
	B. Name of Individua	ıl	Number of Ticket(s)/		Identify one of the following	g:	
	famous , ungl		Pass(es)	Ceremonial Role Other I			
				Ceremonial Role Other Income			
				Ceremonial Role		Income 🔲	
				и спескид Сегетопк	al Role" or "Other" describe below:		
	C. Name of Outside Organ		Number of	Panadha tha subt	lle quenes made automobile.	the geometric setting	
	(include address and des		Ticket(s)/ Pass(es)	nescribe the publ	lic purpose made pursuant to	o die agency a policy	
1.	Verification //						
	I have read and understand FPPC Regul	lations 18944,1 and	l 18942. I have ve	rified that the distribution set fo	orth above, is in accordance with	the requirements.	
	DAD.		Scott Ocl	hoa	City Manager	May, 12, 2016	
	Signature of Agency Head or Designee		Print Nam	в	Title	(Month, Day, Year)	
	Comment:						

1.	Agency Name				Date Stamp	California 802	
	City of Glendale, California					romi	
	Division, Department, or Regi	on (If Applicable	9)			For Official Use Only	
	Management Services						
	Designated Agency Contact (Name, Title)					
	Scott Ochoa, City Manager						
	Area Code/Phone Number	E-mail			Amendment (Must pro	ovide explanation in Part 3.)	
	818-548-4844	sochoa@gle	endaleca.gov	,	Date of Original Filing:	(Month, Day, Year)	
2.	Function or Event Infor	mation	••				
	Does the agency have a ticker	t policy?	Yes 🛛 No	☐ Face Value o	f Each Ticket/Pass \$	35.00	
	Event Description Glendale D	Glendale Dodger Night Data(s) 05			, 12 , 16	1 1	
	Event Description	Provide Title/Exp	lanation	Date(s)			
	Ticket(s)/Pass(es) provided by	y agency?	Yes ⊠ No	☐ If no:	Name of Sour		
							
	Was ticket distribution made a of agency official?	it the behest	No 🛛 Yes	If yes:	Official's Name (La	est. First)	
3.	Recipients	de densetment or	unit a lisa Sac	rtion B to identify an individu	al a Use Section C to Identif	v an outside omanization	
Use Section A to identify the agency's department or unit. Use Section B to identify an Individ Number of				olic purpose made pursuant to the agency's policy			
A. Name of Agency, Department or Unit Ticket(s)' Pass(es)			резспре те рио	iic purpose made pursuant t	o the agency's policy		
Finance FP				ion of City recognition,			
			2	visibility and/or prof	ile on a local scale		
						_	
	B. Name of Individua	ıl	Number of Ticket(s)/		Identify one of the following:		
	(Led, First)		Pass(es)				
				Ceremonial Role # checking *Ceremoni	U Other U ial Role" or "Other" describe below:	Income	
				_			
				Ceremonial Role		Income	
				If checking *Ceremoni	al Role" or "Other" describe below:		
	A Name - FO-4-12- 6		Number of				
	C. Name of Outside Organ (include address and des		Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant to	o the agency's policy	
	•						
_	Vorification //						
ŧ.	Verification I have read and understand FPPC Regul	lations 18944.1 and	d 18942, I have ve	erified that the distribution set fo	orth above, is in accordance with	the requirements.	
	#11/		Scott Oc		City Manager	May, 12, 2016	
	Signature of Agency Head or Designee		Print Nam		Titto	(Month, Day, Year)	
	·						
Comment:							

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1.	Agency Name				Date Stamp	California 802
	City of Glendale, California					Form OUZ
	Division, Department, or Reg	ion (if Applicabl	θ)		1	For Official Use Only
	Management Services					
	Designated Agency Contact ((Name, Title)				
	Scott Ochoa, City Manager					
	Area Code/Phone Number	E-mail			Amendment (Must ρτο	vide explanation in Part 3.)
	818-548-4844	sochoa@gle	endaleca.gov	,	Date of Original Filing:	(Month Day Year)
2.	Function or Event Infor	mation				,
	Does the agency have a ticke	t policy?	Yes 🔀 No	☐ Face Value o	f Each Ticket/Pass \$	35.00
	Event Description Glendale I	Oodger Night			, 12 , 16	, ,
	Exert Description	Provide Title/Exp	lanation	Date(s)		
	Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no:		Name of Sour			
Was ticket distribution made at the behest No ☑ Yes ☐ If yes: of agency official?		Official's Name (La	st First)			
			-moure rumo (Le	y		
3.	Recipients • Use Section A to identify the agence	v's department or	unit. • Usa Sec	iblyibel es vilinebi of 8 noti:	ial. • Use Section C to Identifi	v an outside organization
	_		Number of	ction 8 to Identify an Individual. • Use Section C to Identify an outside organization.		
A. Name of Agency, Department or Unit			Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy		
	Fire		4		Public Purpose, Promoti	ion of City recognition,
			1	visibility and/or profi	ile on a local scale	
			-			
	B. Name of Individua	al	Number of Ticket(s)/	identify one of the following:		
	,		Pass(es)	Ceremonial Role Other Income Income		
					iel Role" or "Other" describe below:	
	V 100 - 10000 100 - 10 01					
				Ceremonial Role	Other D	tncome
				a Greaking Ceremonii	GITTON OF CHIEF BUSICIDE BEIOW!	
				5.000 - 35532		
	C. Name of Outside Organ		Number of	Donorihe the model	lic purpose made pursuant to	the agency's policy
	(include address and des		Ticket(s)/ Pass(es)	nesering nis boot	ing hartage ingge barangut (c	nie adairch a bolich
	9.					
				50 P (E7066) k ·		
1.	Verification //					
	I have read and understand FPPC Regu	lations 18944,1 an	d 18942. I have ve	rified that the distribution set fo	orth above, is in accordance with t	the requirements.
	DICK		Scott Ocl	hoa	City Manager	May, 12, 2016
	Smature of Agency Head or Designee		Print Nam	•	Title	(Month, Day, Year)
	Comment:					

						A Fublic Document	
ı.	Agency Name				Date Stamp	California 202	
	City of Glendale, California					Form UUZ	
	Division, Department, or Regi	ion (If Applicable	e)			For Official Use Only	
	Management Services						
	Designated Agency Contact (Name, Title)		<u> </u>			
	Scott Ochoa, City Manager						
	Area Code/Phone Number	E-mail			Amendment (Must pro	ovide explanation in Part 3.)	
	818-548-4844	sochoa@gle	endaleca.gov	,	Date of Original Filing: _	(Month, Day, Year)	
2.	Function or Event Infor					(Monut, Day, Teal)	
	Does the agency have a ticke		Yes 🛛 No	☐ Face Value o	f Each Ticket/Pass \$	35.00	
		_	, 12 , 16	, ,			
	Event Description	Provide Title/Exp	lanation	Date(s)			
	Ticket(s)/Pass(es) provided by	v agency?	Yes 🛛 No	□ If no:	Name of Sou		
			103 24 110		Name of Sou	TO	
	Was ticket distribution made a of agency official?	t the behest	No 🛛 Yes	Yes If yes:			
					Omdars Name (La	isi, riisij	
3.	Recipients Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.						
A. Name of Agency, Department or Unit			Number of	1		-	
			Ticket(s)/ Pass(es)				
Library		4			tion of City recognition,		
		1	visibility and/or profi	ile on a local scale			
	B. Name of Individua	ıl	Number of Ticket(s)/		Identify one of the following:		
	[Laoc racy		Pass(es)				
				Ceremonial Role If checking *Ceremoni	Other al Role" or "Other" describe below:	Income	
				Ceremonial Role		Income	
				If checking "Ceremoni	el Role" or "Other" describe below:		
	C. Name of Outside Organ	ization	Number of			. =0068	
	(include address and des		Ticket(s)/ Pass(es)	Describe the publ	lic purpose made pursuant t	o the agency's policy	
	Verification /		1				
I have read and understand PPC Regulations 18944.1 and 18			d 18942. I have ve	erified that the distribution set fo	orth above, is in accordance with	the requirements.	
	75/th	·	Scott Oc	hoa	City Manager	May, 12, 2016	
	Signature of Agency Head or Designee		Print Nam	00	Title	(Month, Day, Year)	
	Comment						
	Comment:						

1.	Agency Name		Date Stamp	California 802					
	City of Glendale, California			Form OUZ					
	Division, Department, or Reg	ion (If Applicable		For Official Use Only					
	Management Services								
	Designated Agency Contact	(Name, Title)							
	Scott Ochoa, City Manager	•							
	Area Code/Phone Number	E-mail	☐ Amendment (Must provide explanation in Part 3.)						
	818-548-4844 sochoa@glendaleca			,	Date of Original Filing:(Month, Day, Year)				
2.	unction or Event Information					(моли, рау, теаг)			
	Does the agency have a ticke	Yes 🔯 No	Face Value o	f Each Ticket/Pass \$	35.00				
	Event Description Glendale E			Date(s)					
	Event Description	Provide Title/Expl							
					Name of Sou				
				L	Name of Sou	rce			
	Was ticket distribution made at the behest No 🛛 Yes			If yes:Official's Name (Lest, First)					
_	of agency official?				Oncas Name (C	aat, 1-00G			
3.	Recipients • Use Section A to Identify the agency's department or unit. • Use Section B to Identify an Individual. • Use Section C to Identify an outside organization.								
	Number of								
	A. Name of Agency, Department or Unit			Describe the pub	blic purpose made pursuant to the agency's policy				
	Information Services		FPPC 18944.1(C)-Public Purpose. Promotion of City recognition,						
			1 1	visibility and/or profile on a local scale					
	<u> </u>								
	B. Name of individual		Number of Ticket(s)/	Identify one of the following:					
	1		Pass(es)	Ceremonial Role	Other	Income 🔲			
				Ceremonial Role U Other U Inc. If checking "Ceremonial Role" or "Other" describe below:		іпсопів 📘			
				120					
			1						
				Ceremonial Role Other High Higher Ceremonial Role of Other describe below:		Income			
] [n Greating Ceremoni	er now or Curer describe below:				
	C. Name of Outside Organization		Number of	Describe the publ	ic purpose made pursuant to the agency's policy				
	(include address and description)		Ticket(s)/ Pass(es)			o die agency a policy			
	Verification //		•						
	I have read and understand FPPC Regu	lations 18944.1 and	l 18942. I have ve	rified that the distribution set fo	orth above, is in accordance with	the requirements.			
BHI		Scott Ochoa		City Manager	May, 12, 2016				
	Signature of Agency Head or Designee		Print Nem	e	Title	(Month, Day, Year)			
	Comment:								

						A Fubile Document			
1.	Agency Name		Date Stamp	California 802					
	City of Glendale, California			1 01111					
	Division, Department, or Reg	ion (if Applicabl	1	For Official Use Only					
	Management Services								
	Designated Agency Contact	(Name, Title)							
	Scott Ochoa, City Manager								
	Area Code/Phone Number	E-mail	Amendment (Must provide explanation in Part 3.)						
	818-548-4844	ndaleca.gov		Date of Original Filing: _	(Month, Day, Year)				
2	Function or Event Infor					(Month, Day, Year)			
- .	Does the agency have a ticke		Yes 🛛 No	☐ Face Value o	of Each Ticket/Pass \$	35.00			
	Event Description Glendale Dodger Night			_					
	Event Description Gleridale L	Provide Title/Exp							
	Talasta VDana (an) manufalant b								
	Ticket(s)/Pass(es) provided by	Yes 🛛 No	o		irce				
	Was ticket distribution made at the behest No ⋈ Yes			□ If yee:					
	of agency official?			Official's Name (Last, First)		est, First)			
3.	Recipients								
	• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.								
	A. Name of Agency, Department or Unit		Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy					
	Police		1	FPPC 18944.1(C)-Public Purpose. Promotion of City recognition, visibility and/or profile on a local scale					
				Visibility and/or prof	ile on a local scale				
			Niverbase of						
	B. Name of Individual		Number of Ticket(s)/		identify one of the following:				
			Pass(es)	Ceremonial Role	Other 🔲	Income 🔲			
				If checking "Ceremonial Role" or "Other" describe below:		income [
				Ceremonial Role Other I		Income			
			 	it checking Ceremoni	al Role of Guier describe below:				
	C. Name of Outside Organization		Number of						
	(include address and description)		Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's police		to the agency's policy			
			1			· · · · · · · · · · · · · · · · · · ·			
1	Verification //		1						
₹+	I have read and Junderstand FPPC Regu	lations 18944.1 and	orth above, is in accordance with	the requirements.					
ZXH X		Scott Ocl	hoa	City Manager	May, 12, 2016				
Signature of Agency Head or Designee			Print Nam		Title	(Month, Day, Year)			
	Comment:								